	gency Report of: eremonial Role Event	s and												
	cket/Admission Distr		5					[ [\	/FA	Pu	blic	Doc	ument	
1.	Agency Name						Date	Stamp	1/					
	CITY OF NEWPORT BEACH						Date Stamp California Form 80							
	Division, Department, or Region (if applicable)						MAI Z	. 1	11 5.	11	For Of	fficial Use	Only	
								OFFICE OF THE CITY CLERK						
	Street Address													
	3300 Newport Boulevard, Newport Beach, CA 92663  Designated Agency Contact (Name, Title)							MY JH	I BEAU	1				
								☐ Amendment (Must provide explanation in Part 3.)						
	David A. Kiff, City Manager  Area Code/Phone Number E-mail							Date of Original Filing:						
	949-644-3005	STORY CONTROL OF THE STORY OF T						(month, day, year)						
2.	Function, Event, or Ceremonial Role Information									04.0000 - D				
	Title Newport Beach Film Festival Face Value of Each Admission \$ _12.00													
	Title Newport Beach Film Festival Face							ich A	dmiss	ion	\$	00	-	
	Description General Admission Date						42	6/	201		05	<sub>/</sub> 03	201	
	Newport Reach Film Factival													
	Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: New							Name of Source						
	Yes □ No ☑ If yes:  Official's Name (Last, First) and Title  The identity of recipient(s) and the explanation:  Name  • Check the income box if the agency official claims admission as													
	(Last, First) or Organization (Name, Address, Descrip	tion)	Admission(s)/ Ticket(s)  Agency  Agency  also p  If not ceren			o provide a ot income,	e income. If the agency official performed a ceremonial role, rovide a description. income, describe the public purpose, including onial roles, performed by an agency official, individual, or ization.							
	Landon O'llhant	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Yes 🗸	I Drome	Promotion of City-sponsored Event			ant	Income				
	Lasky, Gilbert		4	No [					7110					
			-	Yes No								ncome		
				Yes [	]		140					1	ncome	
				No 🗖	]									
				Yes [	7.0							1	ncome	
				No [		**************************************								
				Yes [								ļ	ncome	
3.	<b>Verification</b> I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.									above,				
	Arsam	Dav	Pavid A. Kiff Cit			City Man	Manager				5/	5/10/12		
	Signature of Agency Head or Designee Print Name						Tir	tle			(	(month, a	lay, year)	
	Comment: (Use this space or an attachment for any additional information including amendment explanation.)													

## **GENERAL ADMISSION**

Ticket Recipient	<b>Department</b>	# of Tkts			
Gilbert Lasky	Arts Commissioner				
Total		4			